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7590 07/02/2003

MARGARET M. DUNCAN
MCDERMOTT, WILL & EMERY
227 WEST MONROE STREET
CHICAGO, IL 60606

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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Catherine N. Hunter

(Depositor's name)


(Signature)

September 29, 2003
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
08/899,410	07/23/1997	DEANE E. GALLOWAY		7052

TITLE OF INVENTION: MULTI-LAYER THERMOPLASTIC FILMS AND PACKAGES MADE THEREFROM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$0	\$1300	10/02/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
RICE, KENNETH R	3627	428-035200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

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Issue Fee
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 Advance Order - # of Copies 3

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The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-0206 (enclose an extra copy of this form).

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Joy Ann G. Serauskas Sept 29, 2003
(Authorized Signature) (Date)

Sept. 29, 2003

Joy Ann G. Serauskas, Reg. No. 27,952

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10/08/2003 RHEBRAH1 00000169 130206 08899410

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02 FC:8001 9.00 DA

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